



North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director - Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:	
Candidate Name:	Commettee to Elect Based C FERRY INTON
Treasurer Name:	HARold C. Fearington. (Sel)
Treasurer Address:	POBOX # 23 - 2325 Meredith Rd
(include city, state, & zip)	Bethavia NC 27010 3
•	
Treasurer Phone:	(H) 336-924, 3790 (C) 336-463-7754 5
the duties and responsibilities	mation is correct, and I, as candidate, appoint said treasurer to personally fulfill es imposed upon the appointed treasurer and subject to the penalties and I. Regulation of Election Campaigns of Chapter 163 of the North Carolina
the existing Statement of Or	e Treasurer changes, it will be necessary to certify a new treasurer and amend ganization within 10 days of the vacancy. I further understand that the above ive training by the State Board of Elections within three months of this ticle 163.278.9(k).
7-16-07 Date Signed	Haroll Joanis Francisco

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

Statement of Organization - Candidate Committee

Amendment

Yes No

Use this form to create a new or update an existing candidate committee
This form must be accompanied by forms CRO-3100 and CRO-3500

l Committee Into in thom . Full Name Committee to Elent b. Mailing Address (include City, State and Zip Code) d. Date Organized POBOX #23 2325 Meredith Rd 7-12-07 4-336-924.2790 Berthavia, MC 27010 C 336-403-775d 2/3 Candidate Information: Candidate's Primary Committee a. Full Name d. Party Affiliation c. Candidate ID Number NOW-HARTISON HARON Clamon Feg (1115) Walling Address (include City, State, and Zip Code) PU BOX#23 Commissioner 2325 Meredith Rd Towe of Beshavia (If office sought is nonpartisan, write "Nonpartisan" in [d] Bethania Na 27010 Party Affiliation.) 3. Cusion in the little of the complete of a. Full Name a. Full Name BAROID ChanON FEARYING HAROLD CLAMON FEOURINGTON b. Mailing Address (include City, State, and Zip Code) b Mailing Address (include City, State, and Zip Code) PO Box 23 PO Box 23 2325 Mered, JL Pd 2325 Meredida RI Bellania MC 27010 Bedhavia NC Phone Number d. Email Address c. Phone Number d. Email Address 836-924.2790(H) 336-924-2790(4) 336-403-7754(d) 336-403-775410 62Accounternrision in the deal to the con-Eull Name a. Financial Institution Full Name WAChoviA Bank NONP b. Mailing Address (include City/State, and Zip Code) b. Purpose Compaign Funds disbursaments c. Phone Number d. Email Address c. Account Code CherKING CERTIFICATION I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct. old CFeartingto Signature of Appointed Treaturer



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State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director - Campaign Reporting

FILED BY:

Committee Name:

Treasurer Address:

(include city, state, & zip)

Treasurer Name:

Treasurer Phone:

CRO-3500

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

June 2007

Confidential

Certification of Financial Account Information

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form

I certify that the information provided below is true and accurate. I am providing all account information for

	mmittee. These account rings accounts, or any oth			•		
information provide court of competent ju to provide account in	vided on this form is cond would only be used for a risdiction. It will be necessification on required do not the account number in the second of the	or the purposes of an essary to assign each isclosure reports. If	audit or invest account numbe an account num	igation or as require r a "account code" in	d by a n order	
Type of account	Financial Institution	Address	+ <u>-</u>	Account Number	Account Code	
checking	Wachovia	2925 Regno	Ida Lan NO 2010/	1/2	,	
By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided. The Date Signed Date Signed Signature of Candidate of Treasurer						
In lieu of providing account information, I certify that this committee will not raise of spend any money except for the filing fee. (Only candidates may choose this option.)						
Date Signed			Signature of Candidate or Treasurer			

Certification of Financial Account Information



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Certification of Threshold

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle

FILED BY:	
Committee Name:	Committee to Eleat HAROLD C FEARY INFON
Treasurer Name:	HARALL C. FEARINGEN (Sell)
Treasurer Address:	POBON#23 - 2325 Meredi The Rd
(include city, state, & zip)	Bellowia MC 27016
Treasurer Phone:	(H) 336-924-2790 (C) 336-403-7751
election cycle under the pr until the end of the election expenditures during this el of elections and file require	mittee intends to neither receive nor expend more than \$3,000 during the current ocedures set forth in G.S. 163-278.10A. This certification will remain in effect a cycle for this committee. If this committee exceeds \$3,000 in contributions or ection cycle, I understand that I must immediately notify the appropriate boarded campaign finance reports. AN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.
file the next scheduled repo	y Certification to remain under the \$3000 threshold. I will now be required to ort for all contributions and expenditures that have not been previously reported urrent election cycle. I further agree to file all future reports required
7-16-07	Harold Carrier for
Note: This Contification is	to be filed at the Election Roard where the committee's campaign reports are filed.